



HOLDEN POLICE DEPARTMENT Firearms Application Checklist

My appointment day & time are: _____

Notes: We recommend that all qualified applicants apply for a Class A LTC. If you are issued a lesser license and wish to own a handgun in the future, you would need to reapply and pay another fee.

Chemical Spray - State law no longer requires an LTC or FID for chemical spray only, if 18 years of age or older. Under 18 years of age must still possess a valid FID card (Class C or D).

APPLICATION REQUIREMENTS

NEW:	Appn Fee*	Application	Two References	Two Letters	Full Fingerprints	Class Certificate**	Letter from Employer***	Appointment
Class A LTC	\$100	YES	YES	YES	YES	YES	See note	YES
Class B LTC	New Class B LTCs are no longer being issued							
Class C FID	\$100	YES	NO	NO	YES	YES	"	YES
Class D FID	\$25	YES	NO	NO	YES	NO	"	YES
RENEWAL:								
Class A LTC	\$100	YES	NO	NO	NO	NO	See note	YES
Class B LTC	Class B LTCs are valid until they expire, but will not be renewed as a Class B							
Class C FID	\$100	YES	NO	NO	NO	NO	"	YES
Class D FID	Class D FID card renewal is no longer necessary							

* Fee is waived for renewals aged 70 or over. Fees apply for new applicants regardless of age (except retired law enforcement). Fee for retired law enforcement personnel is \$25. All fees are forfeited if application is denied.

** Class requirement is waived for active military personnel. Your current ID must be presented at your appointment.

*** Applicants who need an LTC or FID for their job must submit a letter from their employer stating it is required.

You must bring your complete application packet with you, or your appointment will be forfeited and you will have to reschedule to the following month. No action can be taken without all of the applicable items:

- ☐ **ALL applicants** must bring their application form, signed and dated.
 - All applicable questions must be completed.
 - If you answered "yes" to any question 1-14 on page 2, you must give details (1st question, page 3).
 - See table above for reference, letter of recommendation, and class certificate requirements.
- ☐ **ALL applicants except those waived (see * note above)** must bring payment.
 - \$100 for Class A LTC and Class C FID card (\$25 for retired law enforcement personnel).
 - \$25 for Class D (Chemical Propellant Only) FID card (Class D renewals are no longer needed).
 - Cash or check made payable to: Town of Holden Police Department.
- ☐ **ALL NEW applicants** must have full fingerprints taken.
 - Full print s will be taken at your appointment at no extra charge
 - Alternatively, you may bring prints taken at another Massachusetts police department (a fee may apply)
- ☐ **NEW applicants for Class A License to Carry** must bring 2 letters of recommendation.
 - Letters must be on letterhead from a responsible non-family member, stating how long they have known you and that they feel you are a fit person to be licensed to carry firearms.
 - Letters should contain the word "firearm".
- ☐ **Applicants applying in relation to their employment** must bring a letter from their supervisor on company letterhead verifying that the LTC or FID is required for employment purposes, and why.
- ☐ **NEW applicants for Class A LTC or Class C FID** must bring a certificate of completion for the state-approved Basic Handgun Safety Course or Hunter Safety Course, completed anywhere in Massachusetts. This requirement is waived for active military personnel, with current ID.

**APPLICATION FOR NEW/RENEWAL OF A FIREARMS IDENTIFICATION CARD (FID) OR
LICENSE TO CARRY FIREARMS OR LICENSE TO POSSESS A MACHINE GUN**

***** **POLICE DEPARTMENT USE ONLY** *****

IT IS THE RESPONSIBILITY OF THE LICENSING AUTHORITY TO ENSURE THE IDENTITY OF THE NEW/RENEWAL APPLICANT IS TRUE AND ACCURATE, AND IN THE CASE OF A RENEWAL, THAT THE APPLICANT IS LINKED TO THE ORIGINAL TRACKING NUMBER.

IF RENEWAL ORIGINAL TRACKING NUMBER ¹

F () _____
City/Town 9 Digit License Number

NEW LTC OR FID NUMBER

() _____
City/Town 9 Digit License Number

¹ THE ORIGINAL TRACKING NUMBER IS OBTAINED FROM THE FIRST ISSUED LTC/FID ISSUED UNDER THE GUN CONTROL ACT OF 1998, WHICH WENT INTO EFFECT ON OCTOBER 21, 1998.

PLEASE COMPLETE THIS APPLICATION FORM AND TAKE IT TO YOUR LOCAL LICENSING AUTHORITY. (LOCAL POLICE DEPARTMENT). DO NOT MAIL TO THE FIREARMS RECORD BUREAU.

PLEASE CHECK ONE:

☐ NEW APPLICANT

☐ RENEWAL – MOST RECENT LICENSE TO CARRY/FID CARD NUMBER _____
ISSUED FROM WHICH CITY/TOWN? _____, MA EXPIRATION DATE _____

CHECK THE TYPE OF LICENSE YOU ARE APPLYING FOR:

☐ FIREARMS IDENTIFICATION CARD RESTRICTED (MACE/PEPPER SPRAY)

☐ FIREARMS IDENTIFICATION CARD

☐ CLASS A LICENSE TO CARRY FIREARMS LARGE CAPACITY

☐ LICENSE TO POSSESS A MACHINE GUN

☐ CHECK IF CLASS A CLUB LICENSE *

* NOTE: ONLY THE COLONEL OF THE MASSACHUSETTS STATE POLICE CAN ISSUE A CLUB LICENSE.

2. IF APPLICATION IS FOR FIRST FID OR LTC, A COPY OF THE **FIREARMS SAFETY CERTIFICATE** OR **HUNTER SAFETY COURSE CERTIFICATE** MUST BE ATTACHED TO THIS APPLICATION.
3. IF ISSUED FOR **EMPLOYMENT PURPOSES** A LETTER FROM EMPLOYER ON COMPANY LETTERHEAD REQUESTING ISSUANCE AND REASON MUST ACCOMPANY THIS APPLICATION.

(EXCEPT FOR SIGNATURE, PRINT OR TYPE ALL REQUESTED INFORMATION)

CITY/TOWN OF: _____, MA

LAST NAME

FIRST NAME

MIDDLE NAME

RESIDENTIAL ADDRESS (Include Number, Street, City/Town, Zip Code)

TELEPHONE NUMBER

IF CLUB LICENSE ADDRESS OF CLUB (Include Number, Street, City/Town, Zip Code)

TELEPHONE NUMBER

DATE OF BIRTH

PLACE OF BIRTH

MOTHER'S MAIDEN NAME

FATHER'S FULL NAME

FT IN
HEIGHT

WEIGHT

BUILD

COMPLEXION

HAIR COLOR

EYE COLOR

OCCUPATION

S. S. NUMBER (Optional)

DRIVER'S LICENSE NUMBER

EMPLOYED BY (SEE # 3 ABOVE)

ADDRESS

TELEPHONE NUMBER

WARNING ANY PERSON WHO KNOWINGLY FILES AN APPLICATION CONTAINING FALSE INFORMATION SHALL BE PUNISHED BY A FINE OF NOT LESS THAN \$500 NOR MORE THAN \$1,000 OR BY IMPRISONMENT FOR NOT LESS THAN 6 MONTHS NOR MORE THAN 2 YEARS IN A HOUSE OF CORRECTION, OR BY BOTH SUCH FINE AND IMPRISONMENT (M.G.L. c.140, § 131).

PLEASE ANSWER THE FOLLOWING QUESTIONS COMPLETELY AND ACCURATELY:

SPACE FOR EXPLANATION AND DETAILS ARE PROVIDED ON PAGE 3.

1. ARE YOU A CITIZEN OF THE UNITED STATES? _____.
IF NATURALIZED GIVE DATE, PLACE AND NATURALIZATION NUMBER: _____.
2. HAVE YOU EVER USED OR BEEN KNOWN BY ANOTHER NAME? _____. IF YES PROVIDE NAME AND EXPLAIN: _____
3. WHAT IS YOUR AGE?* _____ *YOU MUST BE 21 YEARS OF AGE TO APPLY FOR A LICENSE TO CARRY FIREARMS, 18 YEARS OF AGE* TO APPLY FOR A FIREARMS IDENTIFICATION CARD. * 15 YEARS OF AGE BUT LESS THAN 18 YEARS OF AGE WITH SUBMISSION OF A CERTIFICATE FROM PARENT OR GUARDIAN GRANTING PERMISSION TO APPLY FOR A FIREARMS IDENTIFICATION CARD.
4. HAVE YOU EVER BEEN CONVICTED OF A FELONY? _____
5. HAVE YOU EVER BEEN CONVICTED OF THE UNLAWFUL USE, POSSESSION, OR SALE OF NARCOTIC OR HARMFUL DRUGS AS DEFINED IN M.G.L. c. 94C, § 1? _____
6. HAVE YOU EVER BEEN CONVICTED OF A CRIME PUNISHABLE BY INCARCERATION BY MORE THAN (1) ONE YEAR? _____
7. IN ANY STATE OR FEDERAL JURISDICTION HAVE YOU EVER BEEN CONVICTED AS AN ADULT OR ADJUDICATED A YOUTHFUL OFFENDER OR DELINQUENT CHILD FOR THE COMMISSION OF (a) A FELONY; (b) A MISDEMEANOR PUNISHABLE BY IMPRISONMENT FOR MORE THAN 2 YEARS; (c) A VIOLENT CRIME AS DEFINED IN M.G.L. c. 140, § 121; (d) A VIOLATION OF ANY LAW REGULATING THE USE, POSSESSION, OWNERSHIP, SALE, TRANSFER, RENTAL, RECEIPT OR TRANSPORTATION OF WEAPONS OR AMMUNITION FOR WHICH A TERM OF IMPRISONMENT MAY BE IMPOSED; OR (e) A VIOLATION OF ANY LAW REGULATING THE USE, POSSESSION OR SALE OF CONTROLLED SUBSTANCES AS DEFINED IN M.G.L. c. 94, § 1? _____
8. HAVE YOU EVER BEEN CONFINED TO ANY HOSPITAL OR INSTITUTION FOR MENTAL ILLNESS? _____
9. ARE YOU OR HAVE YOU EVER BEEN UNDER TREATMENT FOR OR CONFINEMENT FOR DRUG ADDICTION OR HABITUAL DRUNKENNESS? _____
10. HAVE YOU EVER APPEARED IN ANY COURT AS A DEFENDANT FOR ANY CRIMINAL OFFENSE (EXCLUDING NON-CRIMINAL TRAFFIC OFFENSES)? _____
11. ARE YOU NOW UNDER ANY CHARGE(S) FOR ANY OFFENSE(S) AGAINST THE LAW? _____
12. ARE YOU NOW OR HAVE YOU EVER BEEN THE SUBJECT OF A M.G.L. c. 209A RESTRAINING ORDER OR INVOLVED IN A DOMESTIC VIOLENCE CHARGE? _____
13. HAS ANY LICENSE TO CARRY FIREARMS, PERMIT TO POSSESS FIREARMS, OR FIREARMS IDENTIFICATION CARD ISSUED TO YOU UNDER THE LAWS OF ANY STATE, TERRITORY OR JURISDICTION EVER BEEN SUSPENDED, REVOKED OR DENIED? _____
14. ARE YOU CURRENTLY THE SUBJECT OF ANY OUTSTANDING ARREST WARRANT IN ANY STATE OR FEDERAL JURISDICTION? _____

Continued on page 3

NAME _____ DOB: _____

IF YOU ANSWERED "YES" TO ANY OF THE QUESTIONS FOUR THROUGH FOURTEEN, GIVE DETAILS WHICH MUST INCLUDE DATES, CIRCUMSTANCES AND LOCATION:

(IF NECESSARY USE SEPARATE SHEET OF PAPER TO COMPLETE)

OTHER THAN MASSACHUSETTS, WHAT OTHER STATE, TERRITORY OR JURISDICTION HAVE YOU RESIDED IN?

HAVE YOU EVER HELD A LICENSE TO CARRY IN ANY OTHER STATE, TERRITORY OR JURISDICTION? _____
IF "YES", WHEN, WHERE AND LICENSE NUMBER:

LIST NAME AND ADDRESSES OF TWO REFERENCES (NOT REQUIRED IF APPLYING FOR A FIREARMS IDENTIFICATION CARD):

1. _____

2. _____

REASON (S) FOR REQUESTING THE ISSUANCE OF CARD OR LICENSE:

Continued on the reverse side (page 4)

CHANGE OF ADDRESS NOTIFICATION REQUIREMENTS:

MASSACHUSETTS GENERAL LAW REQUIRES THAT:

ANY LICENSEE SHALL NOTIFY, IN WRITING, THE LICENSING AUTHORITY WHO ISSUED SAID LICENSE, THE CHIEF OF POLICE INTO WHOSE JURISDICTION THE LICENSEE MOVES AND THE EXECUTIVE DIRECTOR OF THE CRIMINAL HISTORY SYSTEMS BOARD OF ANY CHANGE OF ADDRESS. SUCH NOTIFICATION SHALL BE MADE BY CERTIFIED MAIL WITHIN 30 DAYS OF ITS OCCURRENCE. FAILURE TO SO NOTIFY SHALL BE CAUSE FOR REVOCATION OR SUSPENSION OF SAID LICENSE (M.G.L. c.140, § 131 (l)).

A CARDHOLDER SHALL NOTIFY, IN WRITING, THE LICENSING AUTHORITY THAT ISSUED SUCH CARD, THE CHIEF OF POLICE INTO WHOSE JURISDICTION SUCH CARDHOLDER MOVES AND THE EXECUTIVE DIRECTOR OF THE CRIMINAL HISTORY SYSTEMS BOARD OF ANY CHANGE OF ADDRESS. SUCH NOTIFICATION SHALL BE MADE BY CERTIFIED MAIL WITHIN 30 DAYS OF ITS OCCURRENCE. FAILURE TO SO NOTIFY SHALL BE CAUSE FOR REVOCATION OR SUSPENSION OF SUCH CARD (M.G.L. c.140, § 129B (11)).

I DECLARE THE ABOVE FACTS ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF, AND I UNDERSTAND THAT ANY FALSE ANSWER(S) WILL BE JUST CAUSE FOR DENIAL OR REVOCATION OF MY LICENSE TO CARRY FIREARMS AND MAY BE USED IN A CRIMINAL PROCEEDING PURSUANT TO M.G.L c. 140, §§ 129 AND 131.

SIGNED UNDER THE PENALTIES OF PERJURY THIS _____ DAY OF _____, _____
(DAY) (MONTH) (YEAR)

SIGNATURE OF APPLICANT _____

APPLICANT: BRING TO YOUR LOCAL LICENSING AUTHORITY (POLICE DEPARTMENT). DO NOT MAIL THE FIREARMS RECORD BUREAU.

LICENSING AUTHORITY (LOCAL POLICE DEPARTMENT:

PLEASE RETAIN ONE COPY FOR YOUR FILES, FORWARD ONE COPY TO THE FIREARMS RECORD BUREAU WITH THE COMPLETED LTC/FID OR MG LICENSE FOR DATA ENTRY AND ONE COPY TO THE MASS STATE POLICE WITH THE APPLICANT'S FINGERPRINT CARD (FINGERPRINT CARD REQUIRED FOR NEW APPLICANT, ONLY) FOR APPROPRIATE FINGERPRINT SUPPORTED CRIMINAL RECORD CHECK.
